

ISSUE SLIP TABLE AREA (for additional cross references)

| PORT | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION | | | |
| O.P.E. CLASSIFIER | | 103-1-01 | |
| FORMALITY REVIEW | B2 | 5-3-823 | 03-13-21 |
| RESPONSE FORMALITY REVIEW | n | 945 | 6/25/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|------|
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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70
04/14